

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO | DATE |
|---------------------------|----------|-------|----------|
| FEE DETERMINATION | sl | | 4-3-01 |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | AT | 1071 | 05/08/01 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Final | Original | Date |
|-------|-------|----------|--------|
| 1 | ✓ | ✓ | 1/1/01 |
| 2 | ✓ | ✓ | 1/1/01 |
| 3 | ✓ | ✓ | 1/1/01 |
| 4 | ✓ | ✓ | 1/1/01 |
| 5 | ✓ | ✓ | 1/1/01 |
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| Claim | Final | Original | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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